

"PATENT"

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of
Zhaozhong Jiang et al

U. S. Serial No. 10/678,434

Filed: October 3, 2003

Lube Hydroisomerization System

) Before the Examiner
) Prem C. Singh
)
) Confirmation Number: 1597
)
) Group Art Unit: 1764
)
) Family Number: P2002J084 US2

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AUG 04 2006

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

AMENDMENT

The Office Action of April 7, 2006 has been received and reviewed. This
Amendment is directed to that Action.

CERTIFICATION OF FACSIMILE TRANSMISSION		
I hereby certify that this paper is being facsimile transmitted to the Commissioner for Patents facsimile number 1-571-273-8300 on the date shown below.		
KATHLEEN A. KUNA	<i>Kathleen A. Kuna</i>	AUGUST 4, 2006
Print name of person signing certification	Signature	Date

27810
PATENT TRADEMARK OFFICE

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AMENDMENT TRANSMITTAL FORM

In re application of: Zhaozhong Jiang et al
U. S. Serial No.: 10/678,434
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For: Lube Hydroisomerization System

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CERTIFICATION OF FACSIMILE TRANSMISSION		
I hereby certify that this paper is being facsimile transmitted to the Commissioner for Patents facsimile number 1-671-273-8300 on the date shown below.		
<u>KATHLEEN A. KUNA</u>	<u>Kathleen A. Kuna</u>	<u>AUGUST 4, 2006</u>
Print name of person signing certification	Signature	Date

Transmittal herewith is an amendment/response in the above-identified application.

Petition for extension of time pursuant to 37 CFR 1.136 and 1.137 is hereby made, if and to the extent, required. The fee for this extension of time is calculated to be \$ 120.00 to extend the time for filing this response until August 7, 2006.

The fee for any changes in number of claims has been calculated as shown below.

CLAIMS AS AMENDED						
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Total	Claims Remaining		Highest Number	Present	Rate	
Claims	After Amendment		Previously Paid For	Extra		
	*	Minus	**		x 50.00	
Indep. Claims	*	Minus	***		x 200.00	
MULTIPLE DEPENDENT CLAIM FEE					\$ 360.00	
FEE FOR CLAIM CHANGES						

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The total fee for this AMENDMENT, including claim changes and any extension of time is calculated to be \$ _____.

☒ Charge \$ _____ to DEPOSIT ACCOUNT NO. 05-1330.

☒ The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 and 1.17 which may be required by this paper, or credit any overpayment, to DEPOSIT ACCOUNT NO. 05-1330.

DATE OF SIGNATURE

Post Office Address [to which correspondence is to be sent]
ExxonMobil Research and Engineering Company
P. O. Box 900
Annandale, New Jersey 08801-0900

ATTORNEY OR AGENT OF RECORD

Estelle C. Bakun

Registration No. 35,054

☒ Pursuant to 37 CFR 1.34(a)

Facsimile Number: (908) 730-3649

Allocca:kak

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